SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (d of the	OR LINE NUMBER: PAGE 13 OF 13 check only one)  17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) ELIZABETH COLBERT BUSCH FOR (	CONGRESS		
Full Name (Last, First, Middle Initial)  A. MARJORIE 2014			Date of Disbursement
Mailing Address PO BOX 444			12 30 2013
City State CONSHOHOCKEN PA  Purpose of Disbursement Contribution	Zip Code 19428		Amount of Each Disbursement this Period
Candidate Name MARJORIE MARGOLIES-MEZVINSKY		Category/ Type	Transaction ID : SB21.4309
State: PA District: 13  Full Name (Last, First, Middle Initial)			
Mailing Address			Date of Disbursement
City State	Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement			
Candidate Name		Category/ Type	
Office Sought:    House   Disbursement F			
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			M M / D D / Y Y Y
City State Zip Code			Amount of Each Disbursement this Period
Purpose of Disbursement			- , , , , , , , , , , , , , , , , , , ,
Candidate Name		Category/ Type	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00